



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

(CFA-4)

Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

7

INSTRUCTIONS: Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? ☐ Yes ☒ No

COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization) ☐ Check if this is a new name

Claudia Fuentes for Treasurer

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number

(317) 258-7015

4. Mailing Address (address where all campaign finance correspondence is received) ☐ Check if this is a new address

8320 Country Ridge Drive

5. City, State, ZIP Code

Indianapolis, IN 46234

6. Party Affiliation (if applicable)

Democratic

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname)

Claudia O. Fuentes

8. Party Affiliation or If Independent Candidate

Democratic

9. Office Sought (Include district number, if any. **Not required for exploratory committee.**)

Treasurer of Marion County

10. County of Residence

Marion

TYPE OF REPORT

11. Check one:

☐ Pre-Primary ☐ Pre-Election ☒ Annual ☐ Nomination ☐ Other
☐ Final/Disbands Committee (lines 18, 19, and 20 must be "0") ☐ Outgoing Treasurer (within 10 days amend Statement of Organization)

CONVENTION CANDIDATES ONLY

Check one:

☐ Pre-Convention
☐ Post-Convention

12. Reporting Period:

From: Jan 1, 2015 Through: Dec 31, 2015

COLUMN A
This Period

COLUMN B
Year to Date

13. Cash on hand and investments at the beginning of this reporting period.

572.42

14. Cash on hand and investments January 1, current year.

572.42

CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (use Schedule A)

5,416.55

5,416.55

15b. Unitemized

779.31

779.31

15c. Add lines 15a and 15b in both columns

SUBTOTAL

6,195.86

6,195.86

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B

TOTAL

6,768.48

6,768.48

EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (use Schedule B) (Public Question: use Schedule C)

1,321.55

1,321.55

17b. Unitemized

406.31

406.31

17c. Add lines 17a and 17b in both columns

SUBTOTAL

1,727.86

1,727.86

18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)

TOTAL

5,040.62

5,040.62

19. Debts OWED BY the committee (use Schedule D)

—

20. Debts OWED TO the committee (use Schedule E)

—

CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature of Treasurer

Title

Date

Signature of Candidate (if applicable)

Date

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

FOR OFFICE USE ONLY

JAN 19 2016

FILED



**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS
Itemized Contributions and Other Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER

Page 2 of 7

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. Claudia O. Fuentes 8320 Country Ridge Dr Indianapolis, IN 46234 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$175 ⁰⁰	\$175 ⁰⁰	5/9 C7
2. Marco Moreno 652 E. 25th St Indianapolis, IN 46205 Contributor's Occupation (if required) _____	Contributions: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) food fundraiser Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$321.55	\$321.55	5/14 C7
3. Joel Miller 2436 Whispering Way Indianapolis, IN 46239 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$100 ⁰⁰	\$100 ⁰⁰	5/14 C7
4. Kevin Kelly 55 North Sigsbee St Indianapolis, IN 46214 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$100 ⁰⁰	\$100 ⁰⁰	5/14 C7
5. Edward Treacy 9663 Oakhaven Ct Indianapolis, IN 46256 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$250 ⁰⁰	\$250 ⁰⁰	5/14 C7
SUBTOTAL THIS PAGE OF SCHEDULE A		\$ 946.55		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$		

**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)**(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS
Itemized Contributions and Other Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly in **BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) **OVER \$100** per contributor, within a calendar year, **MUST** be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBERPage 3 of 7

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. Edmund Mahern 2225 S. Garfield Dr Indianapolis, IN 46203 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$200 ⁰⁰	\$200 ⁰⁰	5/14 CF
2. Rosalva Alvarez 515 S. 5 th St Zionsville, IN 46077 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$120 ⁰⁰	\$120 ⁰⁰	5/14 CF
3. Gabriel Banuelos 4370 Dunsang CT Indianapolis, IN 46254 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$150 ⁰⁰	\$150 ⁰⁰	5/14 CF
4. Veronica Colin 2614 W. Washington Indianapolis, IN 46222 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$100 ⁰⁰	\$100 ⁰⁰	5/14 CF
5. Billie Breaux 5251 Ladywood Bluff Pl Indianapolis, IN 46224 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$100 ⁰⁰	\$100 ⁰⁰	5/14 CF
SUBTOTAL THIS PAGE OF SCHEDULE A		\$670 ⁰⁰		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$		



**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS
Itemized Contributions and Other Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER

Page 4 of 7

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. Gregory Hahn 1425 Northwood Dr Indianapolis, IN 46240 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$250 ⁰⁰	\$250 ⁰⁰	5/14 C7
2. Dustin Haviland 6830 Antelope Dr Indianapolis, IN 46278 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$100 ⁰⁰	\$100 ⁰⁰	5/14 C7
3. Maria Wildridge 1018 Killian Dr Mooreville, IN 46158 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$100 ⁰⁰	\$100 ⁰⁰	5/14 C7
4. Dani Dotson 6012 Twy ckenham Dr Indianapolis, IN 46234 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$100 ⁰⁰	\$100 ⁰⁰	5/14 C7
5. Henry Fernandez 12091 Emerald Bluff Indianapolis, IN 46234 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$100 ⁰⁰	\$100 ⁰⁰	5/14 C7
SUBTOTAL THIS PAGE OF SCHEDULE A		\$650 ⁰⁰		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$		



**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS
Itemized Contributions and Other Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) **OVER \$100** per contributor, within a calendar year, **MUST** be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER

Page 5 of 7

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. Patricia Whitcomb 7429 Runningbrook Way Indianapolis, IN 46254 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$100 ⁰⁰	\$100 ⁰⁰	5/21 C7
2. Edmund Mahern 2225 S. Garfield Dr Indianapolis, IN 46203 Contributor's Occupation (if required) _____	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$250 ⁰⁰	\$450 ⁰⁰	12/18 C7
3. Enevelia Ontiveros 517 Narva Pl East Chicago, IN 46312 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$400 ⁰⁰	\$400 ⁰⁰	12/19 C7
4. Claudia O. Fuentes 8320 Country Ridge Dr Indianapolis, IN 46234 Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	\$50 ⁰⁰	\$225 ⁰⁰	12/23 C7
5. _____ Contributor's Occupation (if required) _____	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____			
SUBTOTAL THIS PAGE OF SCHEDULE A		\$ 800 ⁰⁰		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$ _____		



**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**

State Form 4806 (R13/11-05)

Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-5)
CONTRIBUTIONS BY
OTHER ORGANIZATIONS**

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts **totalled on ITEM 15a** of the Summary Sheet. All cumulative contributions from other entities **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions **regardless of amount** from candidate's, legislative caucus, and regular party committees **MUST** be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) **OVER \$100** per contributor, within a calendar year, **MUST** be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER

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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. Kevin Munoz Attorney at Law 120 E. Market St, Ste 1200 Indianapolis, IN 46204	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	\$200 ⁰⁰	\$200 ⁰⁰	5/14 C7
2. Lopez Law Office, P.C. 3502 N. Meridian St Indianapolis, IN 46208	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	\$50 ⁰⁰	\$50 ⁰⁰	5/14 C7
3. Committee to Elect Joseph O'Connor P.O. Box 44694 Indianapolis, IN 46244	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	\$1000 ⁰⁰	\$1000 ⁰⁰	12/11 C7
4. Committee to Elect Cherrish Pryor 5276 Deer Creek Dr Indianapolis, IN 46254	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	\$100 ⁰⁰	\$100 ⁰⁰	5/14 C7
5. Bose McKinney & Evans LLP 111 Monument Circle, St 2700 Indianapolis, IN 46204	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	\$1000 ⁰⁰	\$1000 ⁰⁰	9/18 C7
SUBTOTAL THIS PAGE OF SCHEDULE A		\$2,350 ⁰⁰		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$5,416.55		



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4806 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (*over \$200, if regular party committee*). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) **MUST** be itemized on this schedule.

FILE NUMBER

Page 7 of 7

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code <u>C</u> Frank Islas for Council Country Ridge Dr Indianapolis, IN 46234	City County Councillor	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	\$250.00	\$250.00	1/14
Code <u>F</u> Qdoba Catering Meridian St Indianapolis, IN 46204	restaurant	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: food / fundraiser	\$321.55	\$321.55	5/14
Code <u>A</u> Ballpark Communications 3745 E. 45th St Indianapolis, IN 46220		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	\$550	\$550	7/2
Code <u>C</u> Joe Hogsett for Indianapolis 133 W. Market St Indianapolis, IN 46204	Mayor	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	\$100	\$100	7/18
Code <u>C</u> Pam Hickman for Indianapolis 8164 Dean Rd Indianapolis, IN 46240	City - County Councillor City County Councillor	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	\$100	\$100	9/2
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:			
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:			
SUBTOTAL THIS PAGE OF SCHEDULE B			\$1,321.55		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$1,321.55		